

# EXHIBIT A

Commonwealth of Massachusetts

SUFFOLK, SS.

TRIAL COURT OF THE COMMONWEALTH  
SUPERIOR COURT DEPARTMENT  
CIVIL DOCKET NO. 201657-E

Jessica Dubuisson PLAINTIFF(S),

v.

Dimock Community DEFENDANT(S)  
Health Center

SUMMONS

THIS SUMMONS IS DIRECTED TO Dimock Community Health Center (Defendant's name)

You are being sued. The Plaintiff(s) named above has started a lawsuit against you. A copy of the Plaintiff's Complaint filed against you is attached to this summons and the original complaint has been filed in the Superior Court. **YOU MUST ACT PROMPTLY TO PROTECT YOUR RIGHTS.**

1. **You must respond to this lawsuit in writing within 20 days.** If you do not respond, the court may decide the case against you and award the Plaintiff everything asked for in the complaint. You will also lose the opportunity to tell your side of the story. You must respond to this lawsuit in writing even if you expect to resolve this matter with the Plaintiff. **If you need more time to respond, you may request an extension of time in writing from the Court.**
2. **How to Respond.** To respond to this lawsuit, you must file a written response with the court and mail a copy to the Plaintiff's Attorney (or the Plaintiff, if unrepresented). You can do this by:
  - a. Filing your **signed original** response with the Clerk's Office for Civil Business, Superior Court, 3 Pemberton Sq Boston MA 02106 (address), by mail or in person, **AND**
  - b. Delivering or mailing a copy of your response to the Plaintiff's Attorney/Plaintiff at the following address: PO Bernier St apt 5 Lowell MA 01852
3. **What to include in your response.** An "Answer" is one type of response to a Complaint. Your Answer must state whether you agree or disagree with the fact(s) alleged in each paragraph of the Complaint. Some defenses, called affirmative defenses, must be stated in your Answer or you may lose your right to use them in court. If you have any claims against the Plaintiff (referred to as **counterclaims**) that are based on the same facts or transaction described in the Complaint, then you must include those claims in your Answer. Otherwise, you may lose your right to sue the Plaintiff about anything related to this lawsuit. If you want to have your case heard by a jury, you must **specifically** request a jury trial in your Answer or in a written demand for a jury trial that you must send to the other side and file with the court no more than 10 days after sending your Answer. You can also respond to a Complaint by filing a "Motion to Dismiss," if you believe that the complaint is legally invalid or legally insufficient. A Motion to Dismiss must be based on one of the legal deficiencies or reasons listed under Mass. R. Civ. P. 12. If you are filing a Motion to Dismiss, you must also comply with the filing procedures for "Civil Motions" described in the rules of the Court in which the complaint was filed, available at www.mass.gov/courts/case-legal-res/rules of court.

A true copy  
J. Depot  
J. Depot  
of 4/20

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, ss.

SUPERIOR COURT  
CIVIL ACTION  
NO. \_\_\_\_\_

Jessica Dubisson  
PLAINTIFF(S) (PRINT NAME CLEARLY)

20.1657.E

vs.

COMPLAINT

Dimock community health center  
DEFENDANT(S) (PRINT NAME CLEARLY)

falsifying medical  
records and causing  
autism

PARTIES

1. Plaintiff(s) reside(s) at 100 Bernier St apt 5 Lowell MA, 0185  
Street City or Town  
in the County of Middlesex

2. Defendant(s) reside(s) at 55 Dimock St Boston, MA 02119  
Street City or Town  
in the County of Suffolk

FACTS

3. \* SEE ATTACHED  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2020 JUL 29 PM 12:40  
CLERK OF SUPERIOR COURT  
SUFFOLK COUNTY

4. Answer this question only if you are seeking a restraining order against the defendant(s):

Have there been any other Court proceedings, criminal or civil, involving you or your family members and the defendant or defendant's family members?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, describe the Court proceeding(s) and its/their status. \_\_\_\_\_

WHEREFORE, plaintiff demands that:

Dimick Community Health Center  
should be held accountable for causing  
Mason Duboisson Neurological Disorder  
and falsifying his medical records.

SIGNED UNDER THE PENALTIES OF PERJURY.

DATE: July 29, 2020

[Signature]  
Signature of Plaintiff(s)

100 Bernier St apt 5  
Street Address

Bowell Mn

City/Town

774-770-5685

Telephone

20 1657-E

Jessica Dubuisson

July-26-2020

## Falsifying Medical Records and Causing a Neurological Disorder Autism

on January 14/2013 Mason Dubuisson started going to Dimock Community Health Center in Roxbury. He received most of his vaccines at Dimock Community Health Center, especially the ones when he started showing signs of Autism. Mason Dubuisson vaccine records are not accurate for multiple vaccines and for multiple hospitals. The Dtap and mmr are the ones on his medical records noted to cause Autism and there is a discrepancy on the amount that was given for those vaccines. By law in Massachusetts all vaccine records have to be accurate and when I spoken to them about his vaccine records they said it must have generated wrong by the computer, but happened multiple times. Mason started showing signs of Autism around 8-9 month old, he was saying mom and dad then around the time he got vaccinated he stop. (which is noted on his Boston Medical Center records). Mason Dubuisson received Early Intervention on Aug/2014 and was Diagnosed with Autism by Boston Childrens Hospital Kerry Morris a Psychologist at 21 months old. I had Mason Dubuisson get genetic, enviromental and Mitochondrial tested to rule out if it caused his Autism. They were all negative to causing his Autism.

Mason Dubuisson was hitting milestones and then all of a sudden he stop communicating, I knew something was wrong because it happened around the time he was vaccinated. There is a discrepancy with his vaccine records and I researched about Autism because I felt I wasent educated properly about Autism from his doctors. Then I found out the is vaccine court for Autism proceeding, but they tell everyone that vaccines don't cause Autism. Autism is a Neurological Disorder and vaccines can cause Neurological Disorders (will have proof at court proceedings). Mason has been genetic tested and family generation tested to see if it contributed to his Autism he was negative for all and espically the family generation to see if he has neurological Disorder in his family. (will have proof at court proceedings). I wasent made aware by Dimock Community Health Center in Roxbury MA that I could filed for compensation in vaccine court when they found out he has Autism. They made me miss the deadline for vaccine court and didn't tell me to rule out things that could have contributed to his Autism. They need to be held accountable for causing Mason Dubuisson Autism and not making me aware that Autism can be caused by vaccination.

## CIVIL ACTION COVER SHEET

DOCKET NUMBER

20-1657-E

Trial Court of Massachusetts  
The Superior Court

PLAINTIFF(S):

Jessica Dubuison

ADDRESS:

100 Bernier St apt 5  
Lowell MA, 01852

COUNTY

DEFENDANT(S):

Dimock community  
health center

ATTORNEY:

ADDRESS:

ADDRESS:

55 Dimock St  
Boston, MA 02114

BBO:

CODE NO.

B99

TYPE OF ACTION AND TRACK DESIGNATION (see reverse side)

TYPE OF ACTION (specify)

other tortious records

TRACK

A

HAS A JURY CLAIM BEEN MADE?

☐ YES☐ NO

If "Other" please describe:

Falsifying medical records and causing neurological disorder

Is there a claim under G.L. c. 93A?

☐ YES☐ NO

Is this a class action under Mass. R. Civ. P. 23?

☐ YES☐ NO

## STATEMENT OF DAMAGES PURSUANT TO G.L. c. 212, § 3A

The following is a full, itemized and detailed statement of the facts on which the undersigned plaintiff or plaintiff's counsel relies to determine money damages. For this form, disregard double or treble damage claims; indicate single damages only.

## TORT CLAIMS

(attach additional sheets as necessary)

## A. Documented medical expenses to date:

1. Total hospital expenses .....
2. Total doctor expenses .....
3. Total chiropractic expenses .....
4. Total physical therapy expenses .....
5. Total other expenses (describe below) .....

Subtotal (A):

## B. Documented lost wages and compensation to date .....

## C. Documented property damages to date .....

## D. Reasonably anticipated future medical and hospital expenses .....

## E. Reasonably anticipated lost wages .....

## F. Other documented items of damages (describe below) .....

## G. Briefly describe plaintiff's injury, including the nature and extent of injury:

TOTAL (A-F):\$

## CONTRACT CLAIMS

(attach additional sheets as necessary)

☐ This action includes a claim involving collection of a debt incurred pursuant to a revolving credit agreement. Mass. R. Civ. P. 8.1(a).

Provide a detailed description of claim(s):

TOTAL: \$

Signature of Attorney/ Unrepresented Plaintiff:

Date: 10/4/24/2020


RELATED ACTIONS: Please provide the case number, case name, and county of any related actions pending in the Superior Court.

## CERTIFICATION PURSUANT TO SJC RULE 1:18

I hereby certify that I have complied with requirements of Rule 5 of the Supreme Judicial Court Uniform Rules on Dispute Resolution (SJC Rule 1:18) requiring that I provide my clients with information about court-connected dispute resolution services and discuss with them the advantages and disadvantages of the various methods of dispute resolution.

Signature of Attorney of Record: X

Date:

<b>CIVIL TRACKING ORDER</b> <b>(STANDING ORDER 1- 88)</b>	DOCKET NUMBER <b>2084CV01657</b>	<b>Trial Court of Massachusetts</b> <b>The Superior Court</b> 
CASE NAME: Dubuisson, Jessica vs. Dimock Community Health Center		Michael Joseph Donovan, Clerk of Court
TO:		COURT NAME & ADDRESS Suffolk County Superior Court - Civil Suffolk County Courthouse, 12th Floor Three Pemberton Square Boston, MA 02108

**TRACKING ORDER - F - Fast Track**

You are hereby notified that this case is on the track referenced above as per Superior Court Standing Order 1-88. The order requires that the various stages of litigation described below must be completed not later than the deadlines indicated.

**STAGES OF LITIGATION****DEADLINE**

	SERVED BY	FILED BY	HEARD BY
Service of process made and return filed with the Court		10/27/2020	
Response to the complaint filed (also see MRCP 12)		11/27/2020	
All motions under MRCP 12, 19, and 20	11/27/2020	12/28/2020	01/25/2021
All motions under MRCP 15	11/27/2020	12/28/2020	01/25/2021
All discovery requests and depositions served and non-expert depositions completed	05/25/2021		
All motions under MRCP 56	06/24/2021	07/26/2021	
Final pre-trial conference held and/or firm trial date set			11/22/2021
Case shall be resolved and judgment shall issue by			07/29/2022

The final pre-trial deadline is not the scheduled date of the conference. You will be notified of that date at a later time.  
Counsel for plaintiff must serve this tracking order on defendant before the deadline for filing return of service.  
This case is assigned to

DATE ISSUED <b>07/29/2020</b>	ASSISTANT CLERK <b>Philip Drapos</b>	PHONE <b>(617)788-8144</b>
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## DETERMINATION REGARDING FEES AND COSTS

Superior Court

20-1657-E

Case Name and Number

Name of Applicant Jessica Dubuisson

Address 100 Bernier St apt 5 Lowell Ma, 01852  
(Street and number) (City or Town) (State and Zip)

## FORTHWITH DETERMINATION BY CLERK (Register, Recorder)

- ☒ ALLOWED FORTHWITH. The applicant's affidavit appears regular and complete on its face, indicates that the applicant is indigent, and requests waiver, substitution or payment by the Commonwealth of normal fees and costs only. Pursuant to G. L. c. 261, § 27C(2), the application is therefore ALLOWED forthwith without hearing, and the normal fees and costs indicated in the application are:

☒ waived in full ☐ to be paid by the Commonwealth in the amount of \$

- ☐ REFERRED TO A JUDGE. The applicant's affidavit does not satisfy all the conditions of § 27C(2), and is therefore referred to a judge pursuant to § 27C(3), because:

- ☐ The affidavit is not regular and complete on its face.
- ☐ The affidavit does not indicate that the applicant is indigent within the meaning of § 27A.
- ☐ The affidavit requests waiver, substitution or payment by the Commonwealth of extra fees and costs.

Comments:

Describe fees and costs waived:

FILING, SERVICE + COPIES

Date:

7/20/20

Clerk Magistrate/Assistant Clerk (register, recorder/assistant)

X

DETERMINATION BY JUDGE ☐ after hearing ☐ without hearing

## NORMAL FEES AND COSTS

- ☐ The application is ALLOWED with respect to the normal fees and costs indicated in the application, and they are ordered:

☐ waived in full ☐ to be paid by the Commonwealth in the amount of \$ 275 + service